



WAYS IN DEALING AND COPING WITH ELDERLY DURING COVID 19: PERCEPTION OF PRIMARY CAREGIVER (30-50 YEARS)

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Abstract: The present study aimed to deal and cope with elderly during Covid 19. Older people may experience life stressors common to all people, but also stressors that are more common in later life, like a significant ongoing loss in capacities and a decline in functional ability. As a primary caregiver, caring for an elder, children, and a spouse who has a terminal condition, or any other family member or friend who needs help with daily activities. (<https://www.eldercaredirection.com/what-is-a-primary-caregiver/>). Acting as a primary caregiver can be difficult for anyone. It can cause multiple challenges for people who serve in that role. Many caregivers pay so much attention to their loved one that they pay little attention to their own health. They might develop physical symptoms caused by self-neglect or psychological problems such as depression or anxiety. (<https://www.eldercaredirection.com/what-is-a-primary-caregiver/>). The total sample consisted of 60 participants (30 males and 30 females) in the age range of 30 to 50 years. Many of the participants had experience of more than 15 years of taking care of elderly (35%), their education qualification was graduate (51.66%) and most of them were homemakers (80%) or in business (43.33%). The tools used for the present study were Pro forma, self-constructed semi structured questionnaire. Interestingly, the result revealed the reasons that could cause stress among elderly as mentioned by the primary caregiver varied in responses. Primary caregiver indicated that weakening of physical abilities or chronic illness [females (46.66%); males (56.66)]. The study also laid down coping strategies for the elderly and primary caregivers after reviewing the literature as it was seen from the findings of the present study that a lot of elderly and primary caregiver were unaware of the coping strategies that were available and as a researcher it's the potential duty to lay down the strategies so that the elderly and primary caregivers do not face challenges in the future.

Keywords: Primary Caregivers, Elderly

I. INTRODUCTION

The uncharacteristic impact of COVID-19 does not only affects physical health and well-being of the elderly but mental health too, which harms the health system. Mental health issue have always taken a backseat as compared to physical health. Mental well-being is a condition in which individuals can cope up well with multiple pressures of life, appreciate their potential, work effectively and subsidise to their communities. For the overall response and recovery from COVID-19, good mental health is crucial. The most important mental health disorders identified in most research have been correlated with the outbreak of COVID-19 among elderly are stress, symptoms of depression, anxiety, insomnia, outrage, and fright throughout the globe (Sharma. P & Sharma. R. 2021). As a society, we have always depended on families and other caregivers to provide emotional support, and to assist their older parents, grandparents, and other family members when they can no longer function independently, A primary caregiver is someone who's faced with the duty of taking care of a friend or loved one who is no longer able to care for themselves (Schulz R, Eden J, 2016). The objective of the study therefore, was to empower elderly and primary caregiver by providing them with guidelines regarding ways and methods of maintaining mental wellbeing and managing stress.

1. To elicit perception from primary caregiver caring for elderly at home regarding:
 - a) the reasons for hindering/ obstructing mental wellbeing among elderly
 - b) ways of helping improve the mental wellbeing among elderly
 - c) finding reasons that could cause stress among elderly
 - d) improving/ dealing with stress in elderly
 - e) strategies/ guidelines for improving mental wellbeing, stress management and isolation

II. METHODOLOGY

Research design: Exploratory research- The research design applicable to the current study was an exploratory research design as it seeks to study a relatively unexplored area that is 'Mental Wellbeing- Stress Management and Managing Isolation of elderly (60 years and above) during covid pandemic: perception of primary caregivers (30- 50 years)'

Sampling Technique, Sample Size and Sample Characteristics: Snowball and purposive/judgmental sampling was implemented. The sample size consisted of 60 participants, primary caregiver in the age range of 30-50 years (30 males & 30 females). A large majority of females were homemaker (80%) and little more than one-third of the males were in business (43.33%). Income mentioned by one third of the primary caregiver was more than 60, 000 (33.33%). Majority of the participants lived in joint family (63.33%).

Inclusion criteria: The key features of the target population that the investigators will use to answer their research question. In this research it was as follows:

1. Elderly who are 60 years and above
2. Elderly who are staying with their family members or friends (primary caregivers)
3. The participants who have been giving care to elderly for minimum 2 to 3 years
4. The primary caregivers who were taking care of only one elderly
5. Participants who were working full time or part-time

Research process and Developing the Tool: In the initial process of the research, the researcher listed down the topics for the research that were rare and needed the help in future and were interested in from the field of human development. Various topics were short listed and from those the researcher selected elderly mental wellbeing and stress management during Covid as the research topic. The tool was self-constructed after careful review of the objectives of the research to get the perception of primary care giver on mental health and stress-management and improving lifestyle during Covid isolation among elderly. Twenty questions in total were constructed (four open ended and sixteen closed ended) out of which six were applicable for this objective. It is a self-devised and semi structured questionnaire which was set in such a way that the researcher was able to gain an understanding into primary care giver' perception on this topic as well as the various strategies were asked to improve the mental wellbeing and stress among oneself and elderly The reason for having both open and closed-ended questions was to gain a more profound understanding of the selected topic which assisted the researcher in developing a strategies/ guidelines for the elderly and primary caregiver

Plan of analysis: Data was analysed both qualitatively and quantitatively. The plan of analysis was done for different objectives of the study. The first objective of the study was examined using theme extraction and computing percentage and frequency. The responses of participants were qualitatively analysed for four questions such as meaning of term elderly, mental wellbeing and quantitatively analysed using frequencies and percentages.

III. RESULTS

Table 1

Reasons for hindering/ obstructing mental wellbeing among elderly, according to primary caregiver (n=60)

The reasons for hindering/ obstructing mental wellbeing among elderly according to primary caregiver	Primary caregivers (30 -50 years)					
	Female (n=30)		Male (n=30)		Total participants (n=60)	
	f	%	f	%	f	%
physical ill health (high blood pressure, diabetes, heart problems etc.)	12	40	17	56.66	29	48.33
stress	13	43.33	13	43.33	26	43.33
low immune system (chronic illness, HIV/AIDS, cancer, heart disease)	8	26.66	10	33.33	18	30
family breakup or loss (divorce, death of spouse, separation from children etc.)	10	33.33	7	23.33	17	28.33
anxiety	8	26.66	9	30	17	28.33
depression	9	30	7	23.33	16	26.66
panic and fear	3	10	8	26.66	11	18.33
socio economic crises (loss of income, unemployment, poverty, homelessness, incapacity to satisfy basic needs etc)	4	13.33	5	16.66	9	15
abuse	2	6.66	1	3.33	3	5
none of the above	4	13.33	0	0	4	6.66

*Multiple responses were obtained

Table 1: The reasons for hindering/ obstructing of mental wellbeing among elderly: Varied responses were obtained from primary caregivers regarding the reasons for hindrance/ obstruction of mental wellbeing among elderly. Physical ill health like high blood pressure, diabetes, heart problems etc. was suggested by little more than one third of females (40%) and more of males (56.66%). Little more than one third of participants [females (43.33%); males (43.33%)] indicated stress as one of the reasons.

Table 2

Ways of helping improve the mental wellbeing among elderly, according to the primary caregiver (n=60)

Ways of helping improve the mental wellbeing among elderly according to primary caregiver	Primary caregivers (30 -50 years)					
	Female (n=30)		Male (n=30)		Total participants (n=60)	
	f	%	f	%	f	%
being fit as it improves mental health	17	56.66	14	46.66	31	51.66
to have a healthy life without worries and anxiety	15	50	16	53.33	31	51.66
to have a good social, physical, and mental health	10	33.33	13	43.33	23	38.33
increases bone health and strength	12	40	10	33.33	22	36.66
change in how they think, feel, and act as they cope with life	10	33.33	12	40	22	36.66
managing their body weight	12	40	9	30	21	35
staying active promotes cardiovascular and heart health	5	16.66	13	43.33	18	30
improving social wellness	10	33.33	8	26.66	18	30
being focused and give them more energy	5	16.66	5	16.66	10	16.66
to minor the possibility of chronic illness	3	10	6	20	9	15

*Multiple responses were obtained

Table 2: The ways of helping improve the mental wellbeing among elderly: Varied responses were obtained from primary caregiver regarding, ways of helping improve the mental well-being among the elderly. More of the females (56.66%) and little less than half of the males (46.66%) suggested that being fit can improve mental health. To have a healthy life without worries and anxiety was advised by half of the females (50%) and little more than half of the males (53.33%).

Table 3

Finding reasons that could cause stress among elderly, according to primary caregiver (n=60)

Reasons that could cause stress among elderly according to primary caregiver	Primary caregivers (30 -50 years)					
	Female (n=30)		Male (n=30)		Total participants (n=60)	
	f	%	f	%	f	%
weakening of physical abilities or chronic illness	14	46.66	17	56.66	31	51.66
worries of not being able to live independently	14	46.66	11	36.66	25	41.66
death of spouse, relatives, beloved or close friends	12	40	11	36.66	23	38.33
adjusting to the changes due to Covid	10	33.33	9	30	19	31.66
separation from friends or family	6	20	13	43.33	19	31.66
financial status after retirement	6	20	7	23.33	13	21.66

*Multiple responses were obtained

Table 3: Finding reasons that could cause stress among elderly: Interestingly, the reasons that could cause stress among elderly as mentioned by the primary caregiver varied in responses. Little less than half of the females (46.66%) and more of the males (56.66) indicated that weakening of physical abilities or chronic illness whereas little less than half of the females (46.66%) and little more than one third of the males (36.66%) mentioned that worries of not being able to live independently.

Table 4

Improving/ dealing with stress in elderly, according to primary caregiver (n=60)

Improving/ dealing with stress in elderly according to primary caregiver	Primary caregivers (30 -50 years)					
	Female (n=30)		Male (n=30)		Total participants (n=60)	
	f	%	f	%	f	%
talking with family and friends	25	83.33	23	76.66	48	80
doing exercise	9	30	11	36.66	20	33.33
going for walk	10	33.33	8	26.66	18	30
laughing therapy	5	16.66	8	26.66	13	21.66
doing activities on virtual platform	4	13.33	6	20	10	16.66

*Multiple responses were obtained

Table 4: Improving/ dealing with stress in elderly: Large majority of the primary caregiver [females (83.33%); males (76.66%)] indicated that talking with family and friends whereas doing exercise was indicated by little more than quarter of females (30%) and little more than one third of males (36.66%) of how elderly improves and deals with stress.

Table 5

Strategies for improving mental wellbeing, stress management and isolation, according to primary caregiver (n=60)

Strategies for improving mental wellbeing, stress management and isolation according to primary caregiver	Primary caregivers (30 -50 years)					
	Female (n=30)		Male (n=30)		Total participants (n=60)	
	f	%	f	%	f	%
self- motivation (things that inspire elderly)	18	60	19	63.33	37	61.66
engage in hobbies and leisure activities	15	50	17	56.66	32	53.33
eating healthy	17	56.66	11	36.66	28	46.66
sleep enough	15	50	13	43.33	28	46.66
engage in physical & social activities	13	43.33	11	36.66	24	40
take a vacation	11	36.66	12	40	23	38.33
develop new skills (sewing, painting, yoga, dancing)	9	30	10	33.33	19	31.66
by practicing gratitude	6	20	11	36.66	17	28.33
practice meditation, stress reduction or yoga	8	26.66	9	30	17	28.33
accept and seek assistance	4	13.33	9	30	13	21.66
build in regular exercise	6	20	4	13.33	10	16.66
see a counsellor, coach or therapist	2	6.66	4	13.33	6	10

*Multiple responses were obtained

Table 5: Strategies for improving mental wellbeing, stress management and isolation

Varied strategies were suggested by primary caregivers for improving mental wellbeing, stress management and isolation among elderly they were as follows:

- Having self- motivation [females (60%); males (63.33%)];
- Engaging in hobbies and leisure activities [females (50%); males (56.66%)];
- Seeing a counsellor, coach or therapist [females (6.66%); males (13.33%)].

Table 6

Guidelines for improving mental wellbeing, stress management and isolation, according to primary caregiver (n=60)

Guidelines for improving mental wellbeing, stress management and isolation according to primary caregiver	Primary caregivers (30 -50 years)					
	Female (n=30)		Male (n=30)		Total participants (n=60)	
	f	%	f	%	f	%
positive thinking such as appreciating ones achievements and strengths, can help to enhance self- confidence and to cope with stress	20	66.66	17	56.66	37	61.66
the elderly can share their difficulties and feelings in facing stress, and their way of coping, with those they can confide (e.g. relatives and friends).	17	56.66	20	66.66	37	61.66
an active social life with friends and family through phone, internet and social media, healthy lifestyle and relaxation exercises	16	53.33	14	46.66	30	50
can seek help from professionals in case of need	3	10	7	23.33	10	16.66

*Multiple responses were obtained

Table 6: Guidelines for improving mental wellbeing, stress management and isolation

Varied guidelines obtained for improving mental wellbeing, stress management and isolation among elderly they were as follows:

- Positive thinking such as appreciating ones achievements and strengths, can help to enhance self- confidence and to cope with stress [females (66.66%); males (56.66%)];
- Elderly can share their difficulties and feelings in facing stress, and their way of coping, with those they can confide (e.g. relatives and friends). [females (56.66%); males (66.66%)];
- An active social life with friends and family through phone, internet and social media, healthy lifestyle and relaxation exercises [females (53.33%); males (46.66%)].

IV. DISCUSSION

The current research indicates spending time with family, raising awareness of the health and medical impact of Covid 19, engaging in relaxation activities, having safe access to nutritive foods, and exercising as strategies used to overcome the challenges faced by the elderly during isolation. Contradictory to this the review of the literature showed that outdoor spaces, such as walking in the garden of their homes, or the dedication of long hours to gardening and vegetable growing; working with plants and flowers, or mowing the lawn. It would seem that contact with nature would have a beneficial effect on maintaining isolation in their homes without feeling cooped up. (Pisula, Apaza, Baez, Loza, Valverdi, Discacciati, Granero, Santoro, Juan, 2020).

V. CONTRIBUTION OF THE STUDY

The researcher created open and closed ended questionnaire and have been able to successfully execute it on a large group of 60 primary caregivers in a span of 3-4 months offline.

One of the significant contributions of this research has been to create strategies and guidelines for elderly and primary caregivers themselves to enhance their mental well- being and stress management which is truly worthwhile for all those who participated in the research. The researchers are also willing to conduct workshops for primary caregiver and elderly for mental wellbeing and stress management.

REFERENCE

- [1]Smith, M., Steinman, L., Casey, E. (2020). Combating Social Isolation among Older Adults in a Time of Physical Distancing: The Covid-19 Social Connectivity Paradox. *Front Public Health* <https://doi.org/10.3389/fpubh.2020.00403>
- [2]Sharma, P., & Sharma, R. (2021). Impact of Covid-19 on Mental Health and Aging. *Saudi Journal of Biological Sciences*, 28(12), 7046- 7053. <https://doi.org/10.1016/J.Sjbs.2021.07.087>
- [3]Singh, A., & Misra, N. (2009). Loneliness, Depression and Sociability in Old Age. *Industrial Psychiatry Journal*, 18(1), 51–55. <https://doi.org/10.4103/0972-6748.57861>
- [4]Parker S. R. (2015). Elderly Mental Health: Needs. *Mens Sana Monographs*, 13(1), 91–99. <https://doi.org/10.4103/0973-1229.153311>